

#4

PTO/SB/51 (10-00)

Approved for use through 12/30/00. OMB 0651-0033

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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)
155634-0012

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,867,343, granted February 2, 1999, and for which a reissue patent is sought on the invention entitled _____

METHOD AND APPARATUS OF DETERMINING READ AND WRITE ELEMENTS OF A MR HEAD
the specification of which

☒ is attached hereto.

☐ was filed on _____ as reissue application number _____ / _____
and was amended on _____
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

The applicant contends that the original patent claims less than its disclosure provides for. In particular, the applicant is seeking to more fully claim the subject matter of Figures 6A and 9A, along with their corresponding descriptions in the specification.

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Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/31 (10-00)

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)
155834-0012

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.

Name(s) Registration Number

Ben J. Yorks 33,609

Jeff Aiello 38,086

Correspondence Address: Direct all communications about the application to:

☐ Customer Number

Type Customer Number here

Place Customer Number Bar
Code Label here☒ Firm or
Individual Name IRELL & MANELLA LLP

Address 840 Newport Center Drive

Address Suite 400

City Newport Beach

State

California

Zip

92860

Country USA

Telephone (949) 760-0991

Fax

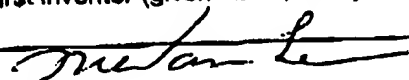
(949) 780-5200

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

Me Van Le

Inventor's signature



Date

Jan. 10, 2001

Residence 870 Pacheco Drive, Milpitas, California 95035

Citizenship U.S.A.

Mailing Address Same as above

Full name of second joint inventor (given name, family name)

Jong-Ming Lin

Inventor's signature

Date

Residence 7950 Cranberry Circle, Cupertino, California 95014

Citizenship U.S.A.

Mailing Address Same as above

Full name of third joint inventor (given name, family name)

Inventor's signature

Date

Residence

Citizenship

Mailing Address

☐ Additional joint inventors are named on separately numbered sheets attached hereto.